Case 17-35987-VFP Doc 46 Filed 07/02/20 Entered 07/02/20 15:18:33 Desc Main Document Page 1 of 7

Fill in this information to identify your case:						
Debtor 1	Jennifer A. Burke First Name Middle Name Last Name					
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		DISTRICT OF NEW JERSEY				
Case number (if known)	17-35987					

■ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

you	original forms, you must fill out a new Summary and check the box at the top of this page.		•
Par	t 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	650,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	29,400.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	679,400.00
Par	t2: Summarize Your Liabilities		
			liabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	622,795.50
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	51,930.00
	Your total liabilities	\$	674,725.50
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	27,130.75
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	21,703.04
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other s	chedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a persona	al, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

Case 17-35987-VFP Doc 46 Filed 07/02/20 Entered 07/02/20 15:18:33 Desc Main Document Page 2 of 7

Debtor 1 Jennifer A. Burke Case number (if known) 17-35987

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____24,779.12

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill in this information	to identify your case:	
Debtor 1	Jennifer A. Burke	
Debtor 2 (Spouse, if filing)		
United States Bankrup	ptcy Court for the: DISTRICT OF NEW JERSEY	
	7-35987	Check if this is:
(If known)		■ An amended filing □ A supplement showing postpetition chapter
Official Form	<u>106l</u>	13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Describe Employment				
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed	■ Employed□ Not employed	
	employers.	Occupation	Teacher	CFO	
	Include part-time, seasonal, or self-employed work.	Employer's name	Glen Rock School District	Geller & Company	
	Occupation may include student or homemaker, if it applies.	Employer's address	620 Harristown Road NJ 07542	909 Third Ave., 16th Floor New York, NY 10022	
		How long employed the	here? 10 Years	7 Years	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 16,770.87 \$ 22,041.67

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

4. \$ 16,770.8 7 \$ 22,041.6 7

Official Form 106I Schedule I: Your Income page 1

Case 17-35987-VFP Doc 46 Filed 07/02/20 Entered 07/02/20 15:18:33 Desc Main Document Page 4 of 7

Deb	ebtor1 Jennifer A. Burke	Case number (<i>if known</i>) 17-35987
	Copy line 4 here	For Debtor 1 For Debtor 2 or non-filing spouse \$ 22,041.67
5.		··· • • • • • • • • • • • • • • • • • •
5.	5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5e. Insurance 5f. Domestic support obligations 5g. Union dues 5h. Other deductions. Specify: Transit	5a. \$ 2,863.34 \$ 5,162.70 5b. \$ 1,257.84 \$ 0.00 5c. \$ 1,714.79 \$ 0.00 5d. \$ 0.00 \$ 0.00 5e. \$ 94.21 \$ 120.53 5f. \$ 0.00 \$ 0.00 5g. \$ 288.38 \$ 0.00 5h.+ \$ 0.00 + \$ 180.00
6.	Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h	6 . \$ <u>6,218.56</u> \$ <u>5,463.23</u>
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4	7 . \$10,552.31
8.	List all other income regularly received: 8a. Net income from rental property and from operating a busi profession, or farm Attach a statement for each property and business showing ground receipts, ordinary and necessary business expenses, and the temonthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or regularly receive Include alimony, spousal support, child support, maintenance, settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cathat you receive, such as food stamps (benefits under the Supposition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify:	8a. \$ 0.00 \$ 0.00 8b. \$ 0.00 \$ 0.00 dependent vorce 8c. \$ 0.00 \$ 0.00 8d. \$ 0.00 \$ 0.00 8e. \$ 0.00 \$ 0.00 h assistance
9.	Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$\$\$
10.	 Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spou 	10. \[\\$ _10,552.31 \] + \[\\$ _4 \] = \[\\$ _7,130.7 \] 5
11.	 State all other regular contributions to the expenses that you list Include contributions from an unmarried partner, members of your ho other friends or relatives. Do not include any amounts already included in lines 2-10 or amount Specify: 	sehold, your dependents, your roommates, and
12.	 Add the amount in the last column of line 10 to the amount in lin Write that amount on the Summary of Schedules and Statistical Sum applies 	pary of Certain Liabilities and Related Data, if it 12. \$\bigsup 27,130.75\$ Combined
13.	B. Do you expect an increase or decrease within the year after you ■ No. □ Yes. Explain:	le this form?

Official Form 106l Schedule I: Your Income page 2

	in this information to identify your case:				
Deb	Jennifer A. Burke		Ch	eck if this is: An amended filing	
Deh	btor 2		-		wing postpetition chapter
	ouse, if filing)				f the following date:
Unit	ited States Bankruptcy Court for the: DISTRICT OF NEW JERSEY			MM / DD / YYYY	
1	se number 17-35987 (nown)				
0	fficial Form 106J				
	chedule J: Your Expenses				12/1
Be info nur	as complete and accurate as possible. If two married people ormation. If more space is needed, attach another sheet to th mber (if known). Answer every question.	are filing together, bot is form. On the top of a	th are eq	ually responsible f tional pages, write	or supplying correct
Par 1.	rt 1: Describe Your Household Is this a joint case?				
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expens</i>	ses for Separate Househ	old of De	ebtor 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent			Dependent's age	Does dependent live with you?
	Do not state the dependents names.	Daughter		17	□ No ■ Yes
		Son		19	□ No ■ Yes
					□ No □ Yes
					□ No □ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?				Lifes
Est	t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless penses as of a date after the bankruptcy is filed. If this is a suplicable date.				
Inc the	· clude expenses paid for with non-cash government assistanc e value of such assistance and have included it on <i>Schedule I</i>			.,	
(Of	fficial Form 106I.)			Your exp	penses
4.	The rental or home ownership expenses for your residence payments and any rent for the ground or lot.	e. Include first mortgage	4.	\$	4,133.04
	If not included in line 4:				
	4a. Real estate taxes		4a.	\$	0.00
	4b. Property, homeowner's, or renter's insurance		4b.	\$	0.00
	Home maintenance, repair, and upkeep expenses Homeowner's association or condominium dues		4c. 4d.	· <u> </u>	200.00 500.00
5.	Additional mortgage payments for your residence, such as	home equity loans	4a. 5.		1,100.00

Case 17-35987-VFP Doc 46 Filed 07/02/20 Entered 07/02/20 15:18:33 Desc Main Document Page 6 of 7

Deb	tor1 _Jennifer A. Burke	Case number (if known)	17-35987
6.	Utilities:		
0.	6a. Electricity, heat, natural gas	6a. \$	650.00
	6b. Water, sewer, garbage collection	6b. \$	150.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	550.00
	6d. Other. Specify:	6d. \$	0.00
7			
7.	Food and housekeeping supplies	7. \$	1,000.00
8.	Childcare and children's education costs	8. \$	0.00
9.	Clothing, laundry, and dry cleaning	9. \$	500.00
	Personal care products and services	10. \$	50.00
	Medical and dental expenses	11. \$	220.00
12.	Transportation. Include gas, maintenance, bus or train fare.	40 f	CEO 00
	Do not include car payments.	12. \$	650.00
	Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	100.00
14.	Charitable contributions and religious donations	14. \$	100.00
15.	Insurance.		
	Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a. \$	0.00
	15b. Health insurance	15b. \$	0.00
	15c. Vehicle insurance	15c. \$	0.00 125.00
	15d. Other insurance. Specify:	15d. \$	0.00
16	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	ou.	
10.	Specify:	16. \$	0.00
17	Installment or lease payments:	10. ψ	0.00
17.		17c ¢	0.00
	17a. Car payments for Vehicle 1	17a. \$	
	17b. Car payments for Vehicle 2		0.00
	17c. Other. Specify:	17c. \$	0.00
	17d. Other. Specify:	17d. \$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as		2 000 00
	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		3,000.00
19.	Other payments you make to support others who do not live with you.	\$	0.00
	Specify:	19.	
20.	Other real property expenses not included in lines 4 or 5 of this form or on Sch	edule I: Your Income.	
	20a. Mortgages on other property	20a. \$	0.00
	20b. Real estate taxes	20b. \$	0.00
	20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
	20e. Homeowner's association or condominium dues	20e. \$	0.00
21	Others One of the Parks Marks and a second	04 . 6	300.00
۷١.			550.00
	Parking Tolls		325.00
		+\$	
	Tutors & Sports Activities	+\$	1,000.00
	Helps Children for College	+\$	4,500.00
	Help elderly parents	+\$	2,000.00
22.	Calculate your monthly expenses		
22.			01 500 04
	22a. Add lines 4 through 21.	\$	21,703.04
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.	\$	21,703.04
	, , ,	· -	,
23.	Calculate your monthly net income.		
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	27,130.75
	23b. Copy your monthly expenses from line 22c above.	23b\$	21,703.04
	23c. Subtract your monthly expenses from your monthly income.		
	The result is your <i>monthly net income</i> .	23c. \$	5,427.71
	· · · · · · · · · · · · · · · · · · ·		
24.	Do you expect an increase or decrease in your expenses within the year after y	ou file this form?	
	For example, do you expect to finish paying for your car loan within the year or do you expect you	ur mortgage payment to incr	ease or decrease because of a
	modification to the terms of your mortgage?		
	■ No.		
	Yes. Explain here:		

Fill in this info	ormation to identify your	case:		
Debtor 1	Jennifer A. Bu			
D 17 0	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
(Spouse II, IIIIIIg)	i list ivallie	Wildule Name	Last Name	
United States E	Bankruptcy Court for the:	DISTRICT OF NEW JEF	RSEY	
	17-35987			
(if known)				

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below						
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?							
	No						
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Declaration, and Signature (Official Fo					
	Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.						
X	/s/ Jennifer A. Burke	X					
•	Jennifer A. Burke	Signature of Debtor 2					
	Signature of Debtor 1						
	Date _July 2, 2020	Date					